

Aquaculture Facility Registration Application

In accordance with Acts 199 and 200, P.A. 1996

☐ **INITIAL APPLICATION \$100.00** ☐ **RENEWAL \$75.00**

For questions or to obtain a research facility permit application, contact the
Michigan Department of Agriculture, Animal Industry Division, 517-373-1077

MAILING ADDRESS (Of business.)		FACILITY NAME AND ADDRESS (Where business is conducted.)	
		BUSINESS ADDRESS (If different than above or the mailing address.)	
BUSINESS PHONE:		FACILITY PHONE:	FAX NUMBER:
			EMAIL:
LEGAL DESCRIPTION OF FARM FACILITIES ARE REQUIRED	COUNTY:	SECTION - TOWN - RANGE	TOWNSHIP

SPECIES TO BE REGISTERED: (Use reverse side for additional space.)

I hereby certify that the statements given above are true and accurate to the best of my knowledge. I hereby agree to maintain records in accordance with the provisions of P.A. 199 and 200 of 1996 and make such records available to the Director of Agriculture or his or her duly authorized representative upon demand.

SIGNATURE OF APPLICANT:		DATE:
Name of Applicant: (PLEASE PRINT)		SS# or Federal ID#

NOTE: Importing of live aquaculture species or gametes shall be in compliance with the Animal Industry Act P.A. 466 of 1988, as amended Sec. 29a

Make check, draft or money order payable to: **STATE OF MICHIGAN**

APPLICANT, DO NOT WRITE IN THE SPACE BELOW

Inspection Date	Re-Inspection Date:	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED
REGISTRATION NO: _____ or PERMIT NO: _____	ISSUED BY: _____	DATE: _____

The following are exempt from registration: (under P.A. 199 of 1996, being section 6, (2)).

- Retail bait outlet
- Retail ornamental fish facilities
- Persons using privately controlled waters for noncommercial purposes.
- Public aquariums or zoos.
- Portable retail fishing concessions.

Print the names of species that you wish to handle at your facility from the approved species list.

Example:

Rainbow Trout	Largemouth Bass	Yellow Perch
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Be sure to sign and date the application, and include either your Social Security Number or Federal Identification Number

Make your check, draft or money order payable to **State of Michigan**

Mail your application with your check, draft or money order to:

**MICHIGAN DEPARTMENT OF AGRICULTURE
ANIMAL INDUSTRY DIVISION
PO BOX 30017 LANSING, MI 48909**

ADDITIONAL SPACE FOR LISTING SPECIES FOR FACILITY PERMIT

[illegible]